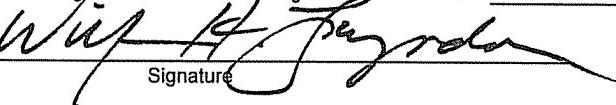


<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional)																								
<b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		4544 - 062454																								
Application Number	10/590,118	Filed 6/11/2007																								
For "Diagnostic Kit for Detecting Pulmonary and Extra Pulmonary"																										
Art Unit 1645	Examiner Rodney P. Swartz, Ph.D.																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th style="text-align: center;"><u>Fee</u></th> <th style="text-align: center;"><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$65</td> <td style="text-align: center;"><u>\$ 130</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$490</td> <td style="text-align: center;">\$245</td> <td style="text-align: center;"><u>\$</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1110</td> <td style="text-align: center;">\$555</td> <td style="text-align: center;"><u>\$</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1730</td> <td style="text-align: center;">\$865</td> <td style="text-align: center;"><u>\$</u></td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2350</td> <td style="text-align: center;">\$1175</td> <td style="text-align: center;"><u>\$</u></td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23-0650</u>.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	<u>\$ 130</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	<u>\$</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	<u>\$</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	<u>\$</u>	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	<u>\$</u>
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I am the	<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. <span style="margin-left: 150px;">Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</span> <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>22,132</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. <span style="margin-left: 150px;">Registration number if acting under 37 CFR 1.34</span> _____																									
 Signature		<u>August 13, 2009</u> Date																								
<u>William H. Logsdon</u> Typed or printed name		<u>412-471-8815</u> Telephone Number																								
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>																										
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																										